

STATEMENT OF ECONOMIC INTERESTS

Date Received
Official Use Only

COVER PAGE

A Public Document

Please type or print in ink.

| | | | | |
|------------------------|------------|----------|--------------------------|--------------------------|
| NAME (LAST) | (FIRST) | (MIDDLE) | DAYTIME TELEPHONE NUMBER | |
| Wilkening | Michael | Richard | (916) 654-3454 | |
| MAILING ADDRESS STREET | CITY | STATE | ZIP CODE | OPTIONAL: E-MAIL ADDRESS |
| 1600 9th Street | Sacramento | CA | 95814 | |

1. Office, Agency, or Court

Name of Office, Agency, or Court:

Health and Human Services Agency

Division, Board, District, if applicable:

Your Position:

Undersecretary, Program and Fiscal Affairs

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)

- ☒ State
- ☐ County of _____
- ☐ City of _____
- ☐ Multi-County _____
- ☐ Other _____

3. Type of Statement (Check at least one box)

- ☐ Assuming Office/Initial Date: ____/____/____
- ☒ Annual: The period covered is January 1, 2009, through December 31, 2009.
- or-
- ☐ The period covered is ____/____/____, through December 31, 2009.
- ☐ Leaving Office Date Left: ____/____/____ (Check one)
- ☐ The period covered is January 1, 2009, through the date of leaving office.
- or-
- ☐ The period covered is ____/____/____, through the date of leaving office.
- ☐ Candidate Election Year: _____

4. Schedule Summary

- Total number of pages including this cover page: 1
- Check applicable schedules or "No reportable interests."
- I have disclosed interests on one or more of the attached schedules:
- Schedule A-1 ☐ Yes – schedule attached
Investments (Less than 10% Ownership)
- Schedule A-2 ☐ Yes – schedule attached
Investments (10% or Greater Ownership)
- Schedule B ☐ Yes – schedule attached
Real Property
- Schedule C ☐ Yes – schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)
- Schedule D ☐ Yes – schedule attached
Income – Gifts
- Schedule E ☐ Yes – schedule attached
Income – Gifts – Travel Payments
- or-
- ☒ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed February 22, 2010
(month, day, year)

Signature _____
(File the originally signed statement with your filing official.)